



RESPONSE UNDER 37 C.F.R. § 1.116
-- EXPEDITED PROCEDURE --
EXAMINING GROUP 1600

Attorney's Docket No: 070452.P001C

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
)	
Forusz et al.)	Examiner: Choi, Frank I.
)	
Application No: 10/057,156)	Art Unit: 1616
)	
Filed: October 25, 2001)	
)	
For: Composition for Increasing Bone)	
<u>Density</u>)	

RESPONSE AFTER FINAL

Mail Stop: AF
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In response to the Final Office Action mailed December 3, 2003, Applicants respectfully request the Patent Office to enter the following amendments and to consider the following remarks.

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PTO/SB/21 (08-03)
Approved for use through 08/30/2003. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/057,156
	Filing Date	October 25, 2001
	First Named Inventor	Forusz, et al.
	Art Unit	1616
	Examiner Name	Choi, Frank I.
Total Number of Pages in This Submission	Attorney Docket Number	70452.P001C

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of mailing, return postcard
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Firm or Individual name	Roberta J. Hanson, Reg. No. 51,774	
Signature	<i>Roberta J. Hanson</i>	
Date	February 3, 2004	

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Signature	<i>Debbie Peloquin</i>	Date	02/03/2004

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